

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

| | | | |
|---|---|--|--|
| The C/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) | 2 Total pages filed: <div style="text-align: center; font-size: 1.2em;">15</div> |
| 3 CANDIDATE / OFFICEHOLDER NAME | <div style="display: flex; justify-content: space-between;"> <div>MS / MRS MR</div> <div>FIRST</div> <div>MI</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">Marvin</div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST</div> <div>SUFFIX</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">Sutton</div> | | <div style="text-align: center; border: 1px solid black; padding: 2px; font-weight: bold;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Received <div style="text-align: center; font-size: 1.5em; transform: rotate(-90deg);">17 JUN -2 PM 2:58</div> <div style="text-align: center; font-size: 1.5em; transform: rotate(-90deg);">RECEIVED - CSO</div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Date Hand-delivered or Date Postmarked </div> <div style="display: flex; border: 1px solid black; margin-top: 5px;"> <div style="flex: 1; border-right: 1px solid black; padding: 2px;">Receipt #</div> <div style="flex: 1; padding: 2px;">Amount \$</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Date Processed</div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Date Imaged</div> |
| | <div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">P. O. Box 182606 Arlington, Texas 76096</div> | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | <div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">(817) 602-0644</div> | | |
| 6 CAMPAIGN TREASURER NAME | <div style="display: flex; justify-content: space-between;"> <div>MS / MRS MR</div> <div>FIRST</div> <div>MI</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">Marvin</div> <hr style="border: 0.5px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST</div> <div>SUFFIX</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">Sutton</div> | | |
| | <div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">1909 Syracuse Court Arlington, Texas 76002</div> | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence or Business) | | | |
| 8 CAMPAIGN TREASURER PHONE | <div style="display: flex; justify-content: space-between;"> <div>AREA CODE</div> <div>PHONE NUMBER</div> <div>EXTENSION</div> </div> <div style="text-align: center; font-size: 1.2em; margin-top: 5px;">(817) 602-0644</div> | | |
| 9 REPORT TYPE | <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input checked="" type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded \$500 limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div> | | |
| 10 PERIOD COVERED | <div style="display: flex; justify-content: space-between;"> <div> Month Day Year <div style="text-align: center; font-size: 1.2em;">4 / 27 / 2017</div> </div> <div>THROUGH</div> <div> Month Day Year <div style="text-align: center; font-size: 1.2em;">5 / 31 / 2017</div> </div> </div> | | |
| 11 ELECTION | <div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year <div style="text-align: center; font-size: 1.2em;">6 / 10 / 2017</div> </div> <div> ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special </div> </div> | | |
| 12 OFFICE | <div style="display: flex; justify-content: space-between;"> <div>OFFICE HELD (if any)</div> <div> 13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">Arlington City Council 3</div> </div> </div> | | |

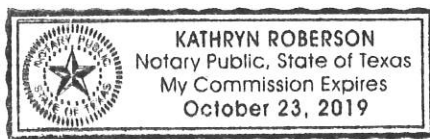
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

| | | | | | | | | | | | |
|---|---|---|--|--|-------------|-----------------------------------|--|--------------------------------------|--|--------------------------------------|--|
| 14 C/OH NAME Marvin Sutton | 15 Filer ID (Ethics Commission Filers) | | | | | | | | | | |
| 16 NOTICE FROM POLITICAL COMMITTEE(S) <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <input type="checkbox"/> Additional Pages </div> | <p style="font-size: small;">THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; vertical-align: top;"> COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC </td> <td style="width:80%;"> <table style="width:100%;"> <tr> <td colspan="2">COMMITTEE NAME</td> </tr> <tr> <td colspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> </td> </tr> </table> | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | <table style="width:100%;"> <tr> <td colspan="2">COMMITTEE NAME</td> </tr> <tr> <td colspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | COMMITTEE NAME | | COMMITTEE ADDRESS | | COMMITTEE CAMPAIGN TREASURER NAME | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | <table style="width:100%;"> <tr> <td colspan="2">COMMITTEE NAME</td> </tr> <tr> <td colspan="2">COMMITTEE ADDRESS</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td colspan="2">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> | COMMITTEE NAME | | COMMITTEE ADDRESS | | COMMITTEE CAMPAIGN TREASURER NAME | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | |
| COMMITTEE NAME | | | | | | | | | | | |
| COMMITTEE ADDRESS | | | | | | | | | | | |
| COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | | | | | |
| COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | | | | | |
| 17 CONTRIBUTION TOTALS | <table style="width:100%;"> <tr> <td style="width:60%;">1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED</td> <td style="width:40%; text-align: right;">\$ 85.00</td> </tr> <tr> <td>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</td> <td style="text-align: right;">\$ 4,325.00</td> </tr> </table> | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 85.00 | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 4,325.00 | | | | | | |
| 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ 85.00 | | | | | | | | | | |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 4,325.00 | | | | | | | | | | |
| EXPENDITURE TOTALS | <table style="width:100%;"> <tr> <td style="width:60%;">3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</td> <td style="width:40%; text-align: right;">\$ 159.94</td> </tr> <tr> <td>4. TOTAL POLITICAL EXPENDITURES</td> <td style="text-align: right;">\$ 6,963.91</td> </tr> </table> | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 159.94 | 4. TOTAL POLITICAL EXPENDITURES | \$ 6,963.91 | | | | | | |
| 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 159.94 | | | | | | | | | | |
| 4. TOTAL POLITICAL EXPENDITURES | \$ 6,963.91 | | | | | | | | | | |
| CONTRIBUTION BALANCE | <table style="width:100%;"> <tr> <td style="width:60%;">5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD</td> <td style="width:40%; text-align: right;">\$ 336.12</td> </tr> </table> | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 336.12 | | | | | | | | |
| 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$ 336.12 | | | | | | | | | | |
| OUTSTANDING LOAN TOTALS | <table style="width:100%;"> <tr> <td style="width:60%;">6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</td> <td style="width:40%; text-align: right;">\$ 0.00</td> </tr> </table> | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 | | | | | | | | |
| 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 | | | | | | | | | | |

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Marvin Sutton, this the 2nd day of June, 20 17, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Kathryn Roberson
 Printed name of officer administering oath

Notary
 Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME**

Marvin Sutton

20 Filer ID (Ethics Commission Filers)**21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

| | | | |
|-----|-------------------------------------|--|-------------|
| 1. | <input checked="" type="checkbox"/> | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 4,325.00 |
| 2. | <input type="checkbox"/> | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> | SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 6,804.94 |
| 6. | <input type="checkbox"/> | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input checked="" type="checkbox"/> | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 158.97 |
| 9. | <input type="checkbox"/> | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | <input type="checkbox"/> | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5**2** FILER NAME

Marvin Sutton

3 Filer ID (Ethics Commission Filers)**4** Date

4/29/2017

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Deborah Spell

7 Amount of contribution (\$)

50.00

6 Contributor address;

City; State; Zip Code

217 Ironbark Dr.

Arlington, TX 76018

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

4/29/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Sergio De Leon

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4521 Diaz Avenue

Fort Worth, TX 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Arthur Brender

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

4121 Hampshire Blvd

Fort Worth, TX 76103

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/1/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jana Sanchez

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

P. O. Box 2068

Waxachachie, TX 75168

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2** FILER NAME

Marvin Sutton

3 Filer ID (Ethics Commission Filers)**4** Date

5/9/2017

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Matthew Hays

7 Amount of contribution (\$)

600.00

6 Contributor address;

City; State; Zip Code

6719 Caribou Dr.

Arlington, TX 76002

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/9/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Siboney Woehr

Amount of contribution (\$)

75.00

Contributor address;

City; State; Zip Code

2301 Wild Goose Way

Arlington, TX 76016

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Karen Henry

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

2415 Bennington Dr.

Arlington, TX 76018

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/12/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barbara Paschal

Amount of contribution (\$)

400.00

Contributor address;

City; State; Zip Code

1701 Pearl Avenue

Albany, GA 31707

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2** FILER NAME

Marvin Sutton

3 Filer ID (Ethics Commission Filers)**4** Date

5/5/2017

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Luis Castillo

6 Contributor address;

City; State; Zip Code

4819 Shadow Crest Dr.

Arlington, TX 76018

7 Amount of contribution (\$)

50.00

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/8/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Jerome Pikulinski

Contributor address;

City; State; Zip Code

2803 Oak Cliff Lane

Arlington, TX 76012

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/8/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anthony Suttice

Contributor address;

City; State; Zip Code

204 White Oak Court

Crowley, TX 76036

Amount of contribution (\$)

20.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Anthony Gair

Contributor address;

City; State; Zip Code

P. O. Box 765022

Dallas, TX 75376

Amount of contribution (\$)

100.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2** FILER NAME

Marvin Sutton

3 Filer ID (Ethics Commission Filers)**4** Date

5/20/2017

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Edward Flores

7 Amount of contribution (\$)

100.00

6 Contributor address;

City; State; Zip Code

1400 Suncrest Ct Arlington, TX 76002

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/20/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matthew Hays

Amount of contribution (\$)

400.00

Contributor address;

City; State; Zip Code

6719 Caribou Drive Arlington, TX 76002

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/21/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Charlie Galupi

Amount of contribution (\$)

50.00

Contributor address;

City; State; Zip Code

1501 Saxony Rd Fort Worth, TX 76116

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/21/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ingrid Kelley

Amount of contribution (\$)

10.00

Contributor address;

City; State; Zip Code

902 Belemeade St Arlington, TX 76014

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:**2** FILER NAME

Marvin Sutton

3 Filer ID (Ethics Commission Filers)**4** Date

5/24/2017

5 Full name of contributor☐ out-of-state PAC (ID#: _____)

Rev. William Dwight McKissic

7 Amount of contribution (\$)

200.00

6 Contributor address;

City; State; Zip Code

2409 Pleasant Circle

Arlington, TX 76015

8 Principal occupation / Job title (See Instructions)**9** Employer (See Instructions)

Date

5/27/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

David Cozad

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

4104 Coronet Lane

Arlington, TX 76017

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/14/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Mark Allen

Amount of contribution (\$)

125.00

Contributor address;

City; State; Zip Code

1004 Abigail Dr Arlington, TX 76002

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/9/2017

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Raquel Gair Sutton

Amount of contribution (\$)

500.00

Contributor address;

City; State; Zip Code

1909 Syracuse Court Arlington, TX 76002

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: 6 | 2 FILER NAME Marvin Sutton | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 5/8/2017 | 5 Payee name Home Depot | |
| 6 Amount (\$) 13.55 | 7 Payee address; City; State; Zip Code 201 Road To Six Flags Arlington, TX 76011 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cable ties |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 5/9/2017 | Payee name Bankem Printing | |
| Amount (\$) 225.00 | Payee address; City; State; Zip Code 2357 S. Collins Street Arlington, TX 76014 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcards |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 5/9/2017 | Payee name Wachelle Williams | |
| Amount (\$) 100.00 | Payee address; City; State; Zip Code 5015 Stagecoach Grand Prairie, TX 75052 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Other | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | | | |
|---|---|--|-------------------------------|---------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Marvin Sutton | 3 Filer ID (Ethics Commission Filers) | | |
| 4 Date 5/9/2017 | 5 Payee name Getty Images Inc | | | |
| 6 Amount (\$) 35.64 | 7 Payee address; City; State; Zip Code 75 Varick Street New York, NY 10013 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stock photos | | |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:40%; border: none;">Candidate / Officeholder name</td> <td style="width:30%; border: none;">Office sought</td> <td style="width:30%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |
| Date 5/9/2017 | Payee name Arlington Voice | | | |
| Amount (\$) 300.00 | Payee address; City; State; Zip Code 5904 S. Cooper Street Suites 104-104 Arlington, TX 76017 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Ad | | |
| | Complete ONLY if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:40%; border: none;">Candidate / Officeholder name</td> <td style="width:30%; border: none;">Office sought</td> <td style="width:30%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |
| Date 5/22/2017 | Payee name Bankem Printing | | | |
| Amount (\$) 225.00 | Payee address; City; State; Zip Code 2357 S. Collins Street Arlington, TX 76014 | | | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcards | | |
| | Complete ONLY if direct expenditure to benefit C/OH <table style="width:100%; border: none;"> <tr> <td style="width:40%; border: none;">Candidate / Officeholder name</td> <td style="width:30%; border: none;">Office sought</td> <td style="width:30%; border: none;">Office held</td> </tr> </table> | | Candidate / Officeholder name | Office sought |
| Candidate / Officeholder name | Office sought | Office held | | |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|--|--|---|-------------|
| 1 Total pages Schedule F1: | | 2 FILER NAME Marvin Sutton | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 5/9/2017 | | 5 Payee name Couture Life | | | |
| 6 Amount (\$) 150.00 | | 7 Payee address; City; State; Zip Code 226 Quail Run Rd Arlington, TX 76014 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Other | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign shirts | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| Date 5/23/2017 | | Payee name Wachelle Williams | | | |
| Amount (\$) 300.00 | | Payee address; City; State; Zip Code 5015 Stagecoach Way Grand Prairie, TX 75052 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Other | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| Date 5/23/2017 | | Payee name HL TVRadio 106.5 FM | | | |
| Amount (\$) 400.00 | | Payee address; City; State; Zip Code 2202 New York Ave Stes 902-904 Arlington, TX 76010 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Radio Ad | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought | Office held |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: | | 2 FILER NAME Marvin Sutton | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 5/23/2017 | | 5 Payee name Bankem Printing | | | |
| 6 Amount (\$) 1,235.00 | | 7 Payee address; City; State; Zip Code 2357 S. Collins Street Arlington, TX 76014 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Printing Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailers and pushcards | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 5/25/2017 | | Payee name Amigos in Business | | | |
| Amount (\$) 300.00 | | Payee address; City; State; Zip Code P. O. Box 123706 Fort Worth, TX 76121 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Advertising Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Ad | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |
| Date 5/25/2017 | | Payee name Kenneth Lawson | | | |
| Amount (\$) 100.00 | | Payee address; City; State; Zip Code 2210 Bassett Dr. Arlington, TX 76018 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Other | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign shirts | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate / Officeholder name | | Office sought Office held | |

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME Marvin Sutton | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 5/25/2017 | 5 Payee name USPS | |
| 6 Amount (\$) 1,505.20 | 7 Payee address; City; State; Zip Code 300 E. South St Arlington, TX 76004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 5/25/2017 | Payee name Operation Preparation | |
| Amount (\$) 1,600.00 | Payee address; City; State; Zip Code 4041 West Wheatland Rd #132 Dallas, TX 75216 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Other | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter outreach |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| Date 5/26/2017 | Payee name Bankem Printing | |
| Amount (\$) 75.00 | Payee address; City; State; Zip Code 2357 S. Collins Street Arlington, TX 76014 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Printing Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcards |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

| | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Marvin Sutton | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 5/27/2017 | 5 Payee name Office Depot | |
| 6 Amount (\$) 80.61 | 7 Payee address; City; State; Zip Code 2503 W. I-20 Grand Prairie, TX 75052 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Other | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ink cartridges |
| | 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |
| Date | Payee name | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> Candidate / Officeholder name Office sought Office held </div> | |

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---------------------------------|-------------------------------|---------------------------------------|
| 1 Total pages Schedule F4: 1 | 2 FILER NAME Marvin Sutton | 3 Filer ID (Ethics Commission Filers) |
|---------------------------------|-------------------------------|---------------------------------------|

| | |
|---|---------|
| 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ 0.00 |
|---|---------|

| | |
|---------------------|--------------------------|
| 5 Date 5/10/2017 | 6 Payee name Facebook |
|---------------------|--------------------------|

| | |
|------------------------|---|
| 7 Amount (\$) 51.15 | 8 Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025 |
|------------------------|---|

| | |
|-----------------------|--|
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|-----------------------|--|

| | | |
|---------------------------|---|---|
| 10 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Ad |
|---------------------------|---|---|

| | | | |
|---|-------------------------------|---------------|-------------|
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

| | |
|-------------------|------------------------|
| Date 5/29/2017 | Payee name Facebook |
|-------------------|------------------------|

| | |
|-----------------------|---|
| Amount (\$) 107.82 | Payee address; City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025 |
|-----------------------|---|

| | |
|---------------------|--|
| TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political |
|---------------------|--|

| | | |
|------------------------|---|---|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Ad |
|------------------------|---|---|

| | | | |
|--|-------------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|--|-------------------------------|---------------|-------------|

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